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## APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\*

NONE BV

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

NONE BV

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*

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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY CT	SHEETS DRAWING 3	TOTAL CLAIMS 11	INDEPENDENT CLAIMS 1
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	EXAMINER'S SIGNATURE By <u>Bj</u> Initials			
Verified and Acknowledged				

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## TITLE

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